

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 091674691	FILING DATE 10-05-00	CLAIMS					
AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT										
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1								51						
2								52						
3								53						
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44								94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	4							TOTAL IND.						
TOTAL DEP.	30							TOTAL DEP.						
TOTAL CLAIMS	34							TOTAL CLAIMS						

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